

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

☐Check if different  
than previously  
reported. (ACC)

Arlington

VA

22206

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325076

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorie Velezis

Signature of Treasurer

Electronically Filed by Dorie Velezis

Date

07

20

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	1167611.58
(b) Cash on Hand at Beginning of Reporting Period .....	1193217.85	
(c) Total Receipts (from Line 19) .....	83112.53	287264.37
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1276330.38	1454875.95
7. Total Disbursements (from Line 31) .....	35088.44	213634.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1241241.94	1241241.94
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	4134.72	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) .....	38260.00	125949.56
(ii) Unitemized .....	35470.93	103859.10
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	73730.93	229808.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	73730.93	229808.66
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	6.60	205.71
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	9375.00	57250.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	9375.00	57250.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	83112.53	287264.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	73737.53	230014.37

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	9375.00	57250.00	
(ii) Non-Federal Share.....	9375.00	57250.00	
(b) Other Federal Operating Expenditures.....	16338.44	98999.01	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	35088.44	213499.01	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	135.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	135.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35088.44	213634.01	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25713.44	156384.01	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	73730.93	229808.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	135.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73730.93	229673.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25713.44	156249.01
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25713.44	156249.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR GARY ALLEN

Mailing Address 5744 E FALL CREEK PARKWAY NORTH DR

City

INDIANAPOLIS

State

IN

Zip Code

46226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VANCO

Occupation  
MANAGER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.51580

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS RHONDA L ANDERSON

Mailing Address 7345 ROYAL COUNTRY DOWN DR

City

WINDSOR

State

CO

Zip Code

80550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CREATIVE MEMORIES

Occupation  
CO FOUNDER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.52014

Amount of Each Receipt this Period

340.00

**C.**

Full Name (Last, First, Middle Initial)

MR DAVID ASBURY

Mailing Address 720 N ISLAND DR NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHWESTERN BENEFIT CORP-  
ORATION

Occupation  
BUSINESS OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.51373

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

940.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0098524-0000417  
Transaction ID : **SA11AI.51580**

B. Form/Schedule : **SA11AI** 0109002-0000818  
Transaction ID : **SA11AI.52014**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51373**

0108961-0000222



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR CHARLES D AYRES

Mailing Address 4911 CASA ORO DR

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.52167

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID BAIN

Mailing Address 1000 PECAN DR

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORWIN ENGINEERING INCORPORATED

Occupation  
ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51889

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MRS SHIRLEY BANTER

Mailing Address 13611 NEILS BRANCH DR

City

HOUSTON

State

TX

Zip Code

77077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51941

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103804-0000968  
Transaction ID : **SA11AI.52167**

B. Form/Schedule : **SA11AI** 0104630-0000698  
Transaction ID : **SA11AI.51889**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51941**

0106328-0000749

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JUDITH BIRDSEYE

Mailing Address 15816 197TH PL NE

City

WOODINVILLE

State

WA

Zip Code

98077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.52275

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DR GARY R BISHOP

Mailing Address 15144 LARRY ST

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIVERSIDE COUNTY

Occupation

PHARMACIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.52112

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

MR KENNETH N BLACKBURN

Mailing Address 10 SHALLOWBROOK DR

City

O FALLON

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AIRTRAN AIRWAYS

Occupation

PILOT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.51778

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

185.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107438-0001069  
Transaction ID : **SA11AI.52275**

B. Form/Schedule : **SA11AI** 0009108-0000916  
Transaction ID : **SA11AI.52112**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51778**

0014063-0000602

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR KENNETH N BLACKBURN

Mailing Address 10 SHALLOWBROOK DR

City

O FALLON

State

IL

Zip Code

62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIRTRAN AIRWAYS

Occupation  
PILOT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51779

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MS ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DR

City

SANTA ROSA

State

CA

Zip Code

95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
TEACHER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.52200

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MS ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DR

City

SANTA ROSA

State

CA

Zip Code

95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
TEACHER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.52201

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51779**

0014063-0000603

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.52200**

0103906-0001001



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52201**

0103906-0001002

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JEAN M BORDUIN

Mailing Address 200 BLACK SKIMMER CT

City

EDGEWATER

State

MD

Zip Code

21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51211

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JEAN M BORDUIN

Mailing Address 200 BLACK SKIMMER CT

City

EDGEWATER

State

MD

Zip Code

21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51212

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR RANDY BRAMEL

Mailing Address 1955 PORT CLARIDGE PL

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRIDGEPORT INVESTMENTS

Occupation  
REAL ESTATE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.52140

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2600.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0085751-0000080  
Transaction ID : **SA11AI.51211**

B. Form/Schedule : **SA11AI** 0085751-0000081  
Transaction ID : **SA11AI.51212**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52140**

0035331-0000942

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 133

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RANDY BRAMEL

Mailing Address 1955 PORT CLARIDGE PL

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRIDGEPORT INVESTMENTS

Occupation

REAL ESTATE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.52141

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY  
RED ROOM 9-W

City

FORT COLLINS

State

CO

Zip Code

80525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
344E FOOTHILLS PARKWAY FC  
COLORADO

Occupation

ASSET MGR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	1	1

Transaction ID: SA11AI.52011

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BOULEVARD N

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SMURFIT STORE CONT. CORP

Occupation

GEN MGR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	7	/	2	0	1	1

Transaction ID: SA11AI.51403

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

1100.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0035331-0000943  
Transaction ID : **SA11AI.52141**

B. Form/Schedule : **SA11AI** 0024811-0000815  
Transaction ID : **SA11AI.52011**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51403**

0012784-0000253

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BOULEVARD N

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMURFIT STORE CONT. CORP

Occupation

GEN MGR

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51404

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BE SERVICES

Occupation

ACCOUNTANT

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.51235

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BE SERVICES

Occupation

ACCOUNTANT

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51236

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51404**

0012784-0000254

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51235**

0107255-0000102

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51236**

0107255-0000103

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR WILLIAM P BUCK, JR

Mailing Address 2084 BROOK HIGHLAND RDG

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF ALABAMA

Occupation  
MOM

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.51454

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR GORDON CHAN

Mailing Address 1023 NE 98TH ST

City

SEATTLE

State

WA

Zip Code

98115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHWEST HOSP

Occupation  
C. T. TECHNOLOGIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.52276

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR C DAN CHENOWETH

Mailing Address 5515 W RICHEY ROAD

City

HOUSTON

State

TX

Zip Code

77066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWS CO- INC

Occupation  
CHARIMAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51934

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0101854-0000302  
Transaction ID : **SA11AI.51454**

B. Form/Schedule : **SA11AI** 0032286-0001070  
Transaction ID : **SA11AI.52276**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51934**

0109143-0000742

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

JAMES COLLINS

Mailing Address 8 QUAIL XING

City

MORAGA

State

CA

Zip Code

94556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ICRM- INC.

Occupation

INVESTMENT ADVISOR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.52183

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR RICHARD E COOLEY

Mailing Address 617 KESTREL CT

City

WOODSTOCK

State

VA

Zip Code

22664

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

SEMI-RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51244

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MRS DOREEN J DEBLIEK

Mailing Address 5523 WOODVIEW PASS

City

MIDLAND

State

MI

Zip Code

48642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51615

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0108789-0000983  
Transaction ID : **SA11AI.52183**

B. Form/Schedule : **SA11AI** 0001316-0000111  
Transaction ID : **SA11AI.51244**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51615**

0072207-0000448



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MR LEONARD A DEO**

Mailing Address **2 SYLDEO DR**

City State Zip Code  
**PARSIPPANY NJ 07054**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FLOWERS & GIFTS- INC.**

Occupation  
**FLORIST**

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 06 / 2011**

**Transaction ID: SA11AI.51150**

Amount of Each Receipt this Period

**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR KIRK L DORN**

Mailing Address **9 CHERRYWOOD DR**

City State Zip Code  
**EAST NORTHPORT NY 11731**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 10 / 2011**

**Transaction ID: SA11AI.51163**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR KIRK L DORN**

Mailing Address **9 CHERRYWOOD DR**

City State Zip Code  
**EAST NORTHPORT NY 11731**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt

**06 / 27 / 2011**

**Transaction ID: SA11AI.51164**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**250.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0001536-0000019  
Transaction ID : **SA11AI.51150**

B. Form/Schedule : **SA11AI** 0076011-0000031  
Transaction ID : **SA11AI.51163**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51164**

0076011-0000032

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 36 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR DON DOWNS

Mailing Address 333 W PASEO DE CRISTOBAL

City

SAN CLEMENTE

State

CA

Zip Code

92672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52148

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. MARTHA A DUNN

Mailing Address 320 KINGS MOUNTAIN ROAD

City

WOODSIDE

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.52180

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MRS NANCY E EARDLEY

Mailing Address 1441 SANDY POINT AVE SE

City

GRAND RAPIDS

State

MI

Zip Code

49546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DECLINED

Occupation  
DECLINED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.51640

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0009205-0000952  
Transaction ID : **SA11AI.52148**

B. Form/Schedule : **SA11AI** 0009497-0000979  
Transaction ID : **SA11AI.52180**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51640**

0104465-0000475

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 39 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS KATHLEEN A ECHELBARGER

Mailing Address 620 SUNSET AVE N

City

EDMONDS

State

WA

Zip Code

98020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.52264

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KATHLEEN A ECHELBARGER

Mailing Address 620 SUNSET AVE N

City

EDMONDS

State

WA

Zip Code

98020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.52265

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR CRAIG W EGLOFF

Mailing Address 27001 HIGHWAY 128

City

YORKVILLE

State

CA

Zip Code

95494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JAYMES & JAYMES

Occupation

INSURANCE BROKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.52204

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103709-0001057  
Transaction ID : **SA11AI.52264**

B. Form/Schedule : **SA11AI** 0103709-0001058  
Transaction ID : **SA11AI.52265**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52204**

0101847-0001005

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JAMES S ENGLUND

Mailing Address 302 CINDI CT

City

LONGVIEW

State

TX

Zip Code

75605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51909

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT G EVERINGHAM

Mailing Address 9505 NORTHPOINTE BOULEVARD APT 102

City

SPRING

State

TX

Zip Code

77379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KROGER

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.51944

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR BOBBI J GOOD

Mailing Address 18161 BASTANCHURY RD

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROSE DRIVE FRIENDS CHURCH

Occupation  
ADMINISTRATOR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.52168

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51909**

0014348-0000720

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51944**

0104780-0000753

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52168**

0101686-0000969

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR CARL E GREEN

Mailing Address 541 PINEHAVEN DR

City

HOUSTON

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C.E. GREEN & COMPANY

Occupation  
OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51931

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR JERRY GREEN

Mailing Address 19654 MATHILDE LN

City

SANTA CLARITA

State

CA

Zip Code

91350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DJ CO-OPS

Occupation  
SMALL BUSINESS OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52097

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS CARL W GUSTKE

Mailing Address 233 STATON RD

City

CABOT

State

AR

Zip Code

72023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FEDERAL EX - (WIFE) REBSA-  
MEN R. H.

Occupation  
PILOT - WIFE DEBORAH-RN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51845

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0104949-0000738  
Transaction ID : **SA11AI.51931**

B. Form/Schedule : **SA11AI** 0103176-0000900  
Transaction ID : **SA11AI.52097**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51845**

0022519-0000662

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

RANDY HAMILTON

Mailing Address 32246 COAL CREEK RD

City

SCAPPOOSE

State

OR

Zip Code

97056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAIMLER TRUCKS NORTH AMER-  
ICA

Occupation

TEST TECHNIION

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.52228

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

SAM HAMILTON

Mailing Address 2201 N SANGRE RD

City

STILLWATER

State

OK

Zip Code

74075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.51873

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR GARY HANSEN

Mailing Address 1604 N HIGHWAY 14

City

AURORA

State

NE

Zip Code

68818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

INTERNET RETAIL

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51835

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0108826-0001025  
Transaction ID : **SA11AI.52228**

B. Form/Schedule : **SA11AI** 0106295-0000685  
Transaction ID : **SA11AI.51873**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51835**

0101730-0000652

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JERYL D HART

Mailing Address 1203 MONTICELLO AVE

City

LUBBOCK

State

TX

Zip Code

79416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
X8ENVIRONMENTAL- INC.

Occupation

CONSULTING ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.51990

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MARYLOU S HARTMAN

Mailing Address 420 CONNER GRANT ROAD

City

NEW BERN

State

NC

Zip Code

28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.51307

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

MR DALE HEDRICK

Mailing Address 2200 CENTRE PARK WEST DR STE 100

City

WEST PALM BEACH

State

FL

Zip Code

33409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HEDRICK BROTHERS

Occupation

GENERAL CONTRACTOR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.51429

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51990**

0105213-0000795

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51307**

0105617-0000162

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51429**

0047814-0000275

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS ROBIN HELLMUTH

Mailing Address 9511 LYNNHALL PL

City

ALEXANDRIA

State

VA

Zip Code

22309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

FULL TIME MOM

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51237

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN HOCEVAR

Mailing Address 348 W EDINBURGH DR

City

HIGHLAND HTS

State

OH

Zip Code

44143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AGENTS CHOICE INSURANCE

Occupation

EXECUTIVE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.51553

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MRS REBECCA E HOMME

Mailing Address PO BOX 156

City

SPICER

State

MN

Zip Code

56288

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51724

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0108926-0000104  
Transaction ID : **SA11AI.51237**

B. Form/Schedule : **SA11AI** 0108867-0000391  
Transaction ID : **SA11AI.51553**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51724**

0108832-0000553



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS DIANA E HULL

Mailing Address 3000 LEWIS RD

City

RIVERTON

State

WY

Zip Code

82501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

SELF EMPLOYED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.52030

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR SCOTT JACKSON

Mailing Address 15 HILLSBOROUGH

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACKSON- DEMARCO- TIDUS  
& PECKENPAU

Occupation

LAWYER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.52142

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ALFRED B KAGAN, JR

Mailing Address 709 LOMAX ST  
PO BOX 400

City

EASTON

State

MD

Zip Code

21601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KAGAN & ASSOCIATES- INC.

Occupation

SELF EMPLOYED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51219

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0008315-0000835  
Transaction ID : **SA11AI.52030**

B. Form/Schedule : **SA11AI** 0034503-0000945  
Transaction ID : **SA11AI.52142**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51219**

0105069-0000089

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

FRED KAREM

Mailing Address 1111 25TH ST NW APT 914

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORE PROPERTY COMPANY

Occupation

APT. DEVELOPER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51203

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR C HOWARD KAST

Mailing Address 2552 E ALAMEDA AVE UNIT 30

City

DENVER

State

CO

Zip Code

80209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.52007

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City

BELEN

State

NM

Zip Code

87002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAIC

Occupation

SCIENTIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.52075

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

340.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107597-0000073  
Transaction ID : **SA11AI.51203**

B. Form/Schedule : **SA11AI** 0014544-0000810  
Transaction ID : **SA11AI.52007**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52075**

0100128-0000877

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 133

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT P KENNETT

Mailing Address 9038 BUBBLING WELLS RD

City

LAKESIDE

State

CA

Zip Code

92040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

TECHNICIAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.52111

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOSEPH KRAUSE

Mailing Address PO BOX 189

City

WILLCOX

State

AZ

Zip Code

85644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	1

Transaction ID: SA11AI.52067

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT LA FLEUR

Mailing Address 2401 OKEMOS DR SE

City

GRAND RAPIDS

State

MI

Zip Code

49506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMERGENCY CARE SPECIALISTS

Occupation

PHYSICIAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	1

Transaction ID: SA11AI.51636

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1200.00

TOTAL This Period (last page this line number only) .....

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.52111**

0102875-0000915

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.52067**

0108807-0000870



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51636**

0106854-0000470

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 133

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JOAN K LAUTENSCHLEGE

Mailing Address 24621 CHARLTON DRIVE

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	1

Transaction ID: SA11AI.52135

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DR PAUL D LEPOR

Mailing Address 170 BRIARWOOD DR

City

LAPEER

State

MI

Zip Code

48446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
FAMILY PHYSICIAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Transaction ID: SA11AI.51612

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

DR JACK W LESCH

Mailing Address 34 SILVERSTRAND PL

City

THE WOODLANDS

State

TX

Zip Code

77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIGHTHOUSE HOSPICEOccupation  
PHYSICIAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	1

Transaction ID: SA11AI.51945

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107445-0000937  
Transaction ID : **SA11AI.52135**

B. Form/Schedule : **SA11AI** 0108329-0000446  
Transaction ID : **SA11AI.51612**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51945**

0020241-0000754

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

GARY W LOCKE, JR

Mailing Address 2602 BOOGER HILL RD

City

DANIELSVILLE

State

GA

Zip Code

30633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USN/STATE OF GEORGIA

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51383

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR MARK LONGNECKER

Mailing Address 2991 WESTSIDE DR

City

CHATTANOOGA

State

TN

Zip Code

37404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN CHAMPION TRAY

Occupation  
CFO

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51494

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MAJ JAMES P LUKE

Mailing Address 4273 BRISTOL DR

City

DAYTON

State

OH

Zip Code

45440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USAF

Occupation  
INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51570

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0102864-0000232  
Transaction ID : **SA11AI.51383**

B. Form/Schedule : **SA11AI** 0098594-0000341  
Transaction ID : **SA11AI.51494**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51570**

0101785-0000407

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

JOCELYN MANULLANG

Mailing Address 8303 121ST AVENUE SE

City

NEW CASTLE

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

HOMEMAKER/HOMESCHOOLING PARENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.52268

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

JOCELYN MANULLANG

Mailing Address 8303 121ST AVENUE SE

City

NEW CASTLE

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

HOMEMAKER/HOMESCHOOLING PARENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.52269

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

JOCELYN MANULLANG

Mailing Address 8303 121ST AVENUE SE

City

NEW CASTLE

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

HOMEMAKER/HOMESCHOOLING PARENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.52270

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0107670-0001062  
Transaction ID : **SA11AI.52268**

B. Form/Schedule : **SA11AI** 0107670-0001063  
Transaction ID : **SA11AI.52269**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52270**

0107670-0001064

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

JOCELYN MANULLANG

Mailing Address 8303 121ST AVENUE SE

City

NEW CASTLE

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

HOMEMAKER/HOMESCHOOLING PARENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52271

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MAE L MCKINLEY

Mailing Address 515 11TH AVE NE

City

MINOT

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.51734

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS RUTH A MERILLAT

Mailing Address 860 RICHLYN DR

City

ADRIAN

State

MI

Zip Code

49221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

MERRILLAT FOUNDATIN - LENAWEE CHRIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51623

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2350.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107670-0001065  
Transaction ID : **SA11AI.52271**

B. Form/Schedule : **SA11AI** 0101794-0000562  
Transaction ID : **SA11AI.51734**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51623**

0097348-0000457

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR BRUCE MOLEN

Mailing Address 714 HI CREST DR

City

AUBURN

State

WA

Zip Code

98001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MOLEN ORTHODONTICS

Occupation

ORTHODONTIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.52261

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR DON P MORGAN

Mailing Address 2 SILVERBERRY

City

LITTLETON

State

CO

Zip Code

80127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FDSC- INC.

Occupation

SALESMAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.52003

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR EDWARD M NICHOLS

Mailing Address 500 SUMMIT LAKE DR STE 120

City

VALHALLA

State

NY

Zip Code

10595

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FUSION FINANCIAL GROUP

Occupation

FINANCIAL PLANNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.51161

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0108410-0001053  
Transaction ID : **SA11AI.52261**

B. Form/Schedule : **SA11AI** 0008111-0000807  
Transaction ID : **SA11AI.52003**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51161**

0108914-0000029



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 133

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City

LA JOLLA

State

CA

Zip Code

92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	1

Transaction ID: SA11AI.52109

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR ALAN M PARK

Mailing Address 2193 RIDGEPOINTE CT

City

WALNUT CREEK

State

CA

Zip Code

94596

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PINC SOLUTIONS- INC.Occupation  
SALES MANAGEMENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Transaction ID: SA11AI.52186

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MR ALAN M PARK

Mailing Address 2193 RIDGEPOINTE CT

City

WALNUT CREEK

State

CA

Zip Code

94596

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PINC SOLUTIONS- INC.Occupation  
SALES MANAGEMENT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.52187

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1550.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0105158-0000912  
Transaction ID : **SA11AI.52109**

B. Form/Schedule : **SA11AI** 0104554-0000986  
Transaction ID : **SA11AI.52186**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52187**

0104554-0000987

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR LINTON PARK

Mailing Address 1630 EASTLAKE CIR

City

TRACY

State

CA

Zip Code

95304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL SEMICONDUCTOR

Occupation  
ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.52195

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR LINTON PARK

Mailing Address 1630 EASTLAKE CIR

City

TRACY

State

CA

Zip Code

95304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL SEMICONDUCTOR

Occupation  
ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.52196

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MRS KATRINKA PARRY

Mailing Address 340 KNOLL CREEK CIR

City

CHATTANOOGA

State

TN

Zip Code

37415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAA

Occupation  
CONTROLLER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51495

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.52195**

0100155-0000995

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.52196**

0100155-0000996

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51495**

0106674-0000343

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
MR SCOTT PEOTTER

Mailing Address 1000 QUAIL STREET SUITE 260

City State Zip Code  
NEWPORT BEACH CA 92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ASLAN

Occupation  
ARCHITECT

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52143

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
CONNIE PETERS

Mailing Address 1600 STATE PARK RD

City State Zip Code  
LOCKHART TX 78644

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LOCAL SCHOOL DISTRICT

Occupation  
TEACHER

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.51979

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
CONNIE PETERS

Mailing Address 1600 STATE PARK RD

City State Zip Code  
LOCKHART TX 78644

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LOCAL SCHOOL DISTRICT

Occupation  
TEACHER

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51980

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0109122-0000946  
Transaction ID : **SA11AI.52143**

B. Form/Schedule : **SA11AI** 0108400-0000783  
Transaction ID : **SA11AI.51979**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51980**

0108400-0000784

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR GARY L PILGRIM

Mailing Address 121 MINE RD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51190

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

GARY POLLAND

Mailing Address 5309 BRAEBURN

City

BELLAIRE

State

TX

Zip Code

77401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POLLAND & ASSOCIATES

Occupation  
ATTORNEY

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.51947

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MR JAMES T PURSELL

Mailing Address 2101 MARBLE VALLEY RD

City

SYLACAUGA

State

AL

Zip Code

35151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PURSELL TECHNOLOGIES

Occupation  
CHAIRMAN

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51451

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51190**

0002326-0000060 REATTRIBUTION FORM SENT TO REATTRIBUTE TO SPOUSE. WILL AMEND ACCORDING  
IPT.

B. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51947**

0109024-0000756

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51451**

0016654-0000298

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS KATRINA HOFF RAUSCH

Mailing Address 210 DEMERS LN

City

POLSON

State

MT

Zip Code

59860

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.51738

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MS BETH L REED

Mailing Address 3613 LITTLE RD

City

LUTZ

State

FL

Zip Code

33548

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51436

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR MIKE D RISINGER

Mailing Address 421 E GREENWOOD ST

City

MORTON

State

IL

Zip Code

61550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IL

Occupation

JUDGE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 1 1

Transaction ID: SA11AI.51765

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0051716-0000565  
Transaction ID : **SA11AI.51738**

B. Form/Schedule : **SA11AI** 0101144-0000283  
Transaction ID : **SA11AI.51436**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51765**

0103251-0000590

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MISS KRISTIN E ROBBINS

Mailing Address 5106 RAINBOW HARBOUR CIR

City

COLORADO SPGS

State

CO

Zip Code

80917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL PASO COUNTY SCHOOL DIS-  
TRICT #11

Occupation

MUSIC TEACHER

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52020

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MR JEFF ROBILLARD

Mailing Address 5028 LONGVIEW CT

City

WEDDINGTON

State

NC

Zip Code

28104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEATTLE SYSTEMS

Occupation

SALES MANAGER

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.51289

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR WAYNE R RODGERS

Mailing Address 1600 MUSTANG TRL

City

KINGWOOD

State

TX

Zip Code

77339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

SEMI-RETIRED ATTORNEY

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.51942

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0020480-0000825  
Transaction ID : **SA11AI.52020**

B. Form/Schedule : **SA11AI** 0108915-0000147  
Transaction ID : **SA11AI.51289**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51942**

0102518-0000750

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MS RUTH RODRIGUEZ

Mailing Address 3565 SHADOW GROVE RD

City

PASADENA

State

CA

Zip Code

91107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

HOUSEWIFE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.52095

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR CLAUDE G SCARBROUGH, III

Mailing Address 6053 ROUND HILL CT

City

COLUMBUS

State

GA

Zip Code

31904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCARBURY PROPERTIES

Occupation

REAL ESTATE PROFESSIONAL

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51396

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MYRA SCHLIESING

Mailing Address 1765 EVANGELINE LN

City

ANCHORAGE

State

AK

Zip Code

99517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52304

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0102266-0000897  
Transaction ID : **SA11AI.52095**

B. Form/Schedule : **SA11AI** 0003494-0000246  
Transaction ID : **SA11AI.51396**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52304**

0107786-0001095

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL SCHNEIDER

Mailing Address PO BOX 871209

City

STONE MOUNTAIN

State

GA

Zip Code

30087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEKALB ANESTHESIA ASSOCIA-  
TES

Occupation

PHYSICIAN

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51356

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MRS JOANNE M SCHROEDER

Mailing Address 15720 52ND AVE N

City

PLYMOUTH

State

MN

Zip Code

55446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTHWESTERN COLLEGE

Occupation

CFO

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.51672

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR GARY J SELF

Mailing Address 8508 YORKSHIRE DR

City

ORANGE

State

TX

Zip Code

77632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAL-MART

Occupation

PHARMACIST

Receipt For:

2012

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51953

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

570.00

**TOTAL** This Period (last page this line number only) .....

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51356**

0105199-0000205

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.51672**

0105676-0000504

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51953**

0013298-0000763



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City

CENTERVILLE

State

OH

Zip Code

45458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.51571

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MARK SHIRLEY

Mailing Address 13121 LOUETTA RD # 1055

City

CYPRESS

State

TX

Zip Code

77429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WM SHIRLEY

Occupation  
PRESIDENT/OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51948

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR RICK B SKINNER

Mailing Address 19111 SCENIC HIGHWAY 98

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.51464

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0104852-0000408  
Transaction ID : **SA11AI.51571**

B. Form/Schedule : **SA11AI** 0108296-0000758  
Transaction ID : **SA11AI.51948**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51464**

0012916-0000312

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City

FAYETTEVILLE

State

GA

Zip Code

30215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US AIR FORCE

Occupation

WEATHER OFFICER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51367

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DR WILLIAM H SMITH

Mailing Address PO BOX 203

City

KAAAWA

State

HI

Zip Code

96730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF HAWAII

Occupation

TEACHER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.52217

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR WAYNE SONCHAR

Mailing Address 491 CHRISTINE DR

City

LAS VEGAS

State

NM

Zip Code

87701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BTU

Occupation

RETAIL

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.52079

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0014942-0000215  
Transaction ID : **SA11AI.51367**

B. Form/Schedule : **SA11AI** 0103927-0001016  
Transaction ID : **SA11AI.52217**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.52079**

0101769-0000882

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MS DIANE R SPRADLIN

Mailing Address 5636 ENCORE DR

City

DALLAS

State

TX

Zip Code

75240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51904

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR MARK SWISHER

Mailing Address 24902 N POINT PL

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AVIARA ENERGY CORPORATION

Occupation  
ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.51951

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

RON TENNY

Mailing Address 100 ROCKINGTON DR

City

TYRONE

State

GA

Zip Code

30290

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
COMPUTER PROGRAMMER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51370

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103857-0000713  
Transaction ID : **SA11AI.51904**

B. Form/Schedule : **SA11AI** 0048257-0000761  
Transaction ID : **SA11AI.51951**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51370**

0108022-0000218

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS CAROL D TEODORO

Mailing Address 3008 E BAY DR NW

City

GIG HARBOR

State

WA

Zip Code

98335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADVANCED WOMEN'S HEALTH

Occupation

MEDICAL ASSISTANT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.52282

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS KAYE K THOMPSON

Mailing Address 9400 PEBBLE BEACH DR NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MICHAEL R THOMPSON DDS

Occupation

ADMINISTRATOR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.52077

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR KEITH THORNTON

Mailing Address 5524 EDLEN DR

City

DALLAS

State

TX

Zip Code

75220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

DENTIST

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51903

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103402-0001076  
Transaction ID : **SA11AI.52282**

B. Form/Schedule : **SA11AI** 0008548-0000879  
Transaction ID : **SA11AI.52077**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51903**

0107076-0000711

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

STEPHEN TITUS

Mailing Address 36 MOUNTAIN VIEW RD

City

MORGANTOWN

State

PA

Zip Code

19543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE TITUS CO

Occupation

BUSINESS OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51195

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS GLENDA WEATHERLY

Mailing Address PO BOX 1245

City

WHEELER

State

TX

Zip Code

79096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.51988

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR JOHN ZEISER

Mailing Address 17 ROCK CREST DR

City

SIGNAL MOUNTAIN

State

TN

Zip Code

37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN CHAMPION TRAY LP

Occupation

MANUFACTURER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.51493

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

38260.00

A. Form/Schedule : **SA11AI** 0108863-0000066  
Transaction ID : **SA11AI.51195**

B. Form/Schedule : **SA11AI** 0102813-0000792  
Transaction ID : **SA11AI.51988**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.51493**

0100236-0000339

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 133

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City  
El Paso

State  
TX

Zip Code  
79998

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.52314

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.95

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City  
El Paso

State  
TX

Zip Code  
79998

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.52315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

0.79

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 981540

City  
El Paso

State  
TX

Zip Code  
79998

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.52316

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.20

**SUBTOTAL** of Disbursements This Page (optional) .....

8.94

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B.52318 <b>Date of Disbursement</b>
Mailing Address P.O. Box 981540	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 1</div> </div>
City El Paso State TX Zip Code 79998	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement BANK FEES	<div> <div></div> <div>3.20</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> SB21B.52319 <b>Date of Disbursement</b>
Mailing Address P.O. Box 981540	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 7 / 2 0 1 1</div> </div>
City El Paso State TX Zip Code 79998	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement BANK FEES	<div> <div></div> <div>0.80</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Authorize.net	<b>Transaction ID:</b> SB21B.52313 <b>Date of Disbursement</b>
Mailing Address 808 East Utah Valley Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 1 1</div> </div>
City American Fork State UT Zip Code 84003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement BANK FEES	<div> <div></div> <div>30.97</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**34.97**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
BB&T

Mailing Address P.O. Box 580363

City State Zip Code  
Charlotte NC 28258

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52317

Date of Disbursement

/   /

Amount of Each Disbursement this Period

37.87

**B.**

Full Name (Last, First, Middle Initial)  
CHOI COMPANIES

Mailing Address 5999 STEVENSON AVE #310

City State Zip Code  
ALEXANDRIA VA 22304

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52332

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2860.44

**C.**

Full Name (Last, First, Middle Initial)  
COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City State Zip Code  
SAN FRANCISCO CA 94139

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52325

Date of Disbursement

/   /

Amount of Each Disbursement this Period

114.18

**SUBTOTAL** of Disbursements This Page (optional) .....

3012.49

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City  
MEMPHIS

State  
TN

Zip Code  
38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52328

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.80

**B.**

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City  
MEMPHIS

State  
TN

Zip Code  
38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52333

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.80

**C.**

Full Name (Last, First, Middle Initial)

INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City  
FAIRFAX

State  
VA

Zip Code  
22031

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52324

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2759.08

**SUBTOTAL** of Disbursements This Page (optional) .....

2830.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DIRECT MAIL PRODUCTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52334

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3900.56

**B.**

Full Name (Last, First, Middle Initial)

IRON MOUNTAIN

Mailing Address 745 ATLANTIC AVE

City State Zip Code  
BOSTON MA 02111

Purpose of Disbursement  
STORAGE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52329

Date of Disbursement

/   /

Amount of Each Disbursement this Period

249.13

**C.**

Full Name (Last, First, Middle Initial)

LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City State Zip Code  
PHILADELPHIA PA 19170

Purpose of Disbursement  
DUES & SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4499.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
LPS

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52331

Date of Disbursement

/   /

Amount of Each Disbursement this Period

928.83

**B.**

Full Name (Last, First, Middle Initial)  
LPS

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52341

Date of Disbursement

/   /

Amount of Each Disbursement this Period

142.45

**C.**

Full Name (Last, First, Middle Initial)  
LPS

Mailing Address P.O. BOX 2325

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

299.85

**SUBTOTAL** of Disbursements This Page (optional) .....

1371.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

LPS

Mailing Address P.O. BOX 2325

City  
FAIRFAX

State  
VA

Zip Code  
22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.52346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

387.17

**B.**

Full Name (Last, First, Middle Initial)

OFFICE SHREDDERS

Mailing Address 6500 KANE WAY

City  
ELKRIDGE

State  
MD

Zip Code  
21075

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.52336

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

THE LUKENS COMPANY

Mailing Address 2800 SHIRLINGTON ROAD #900

City  
ARLINGTON

State  
VA

Zip Code  
22206

Purpose of Disbursement  
PAC - DIRECT MAIL CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.52338

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2437.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 133

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
VERIZON

Mailing Address P.O. BOX 17577

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

449.01

**B.**

Full Name (Last, First, Middle Initial)  
DEAN VIRAG

Mailing Address 15411 RILLHURST DR

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
WEBSITE SUPPORT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52326

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC - CAGING AND DATA ENTRY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.52344

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1088.35

**SUBTOTAL** of Disbursements This Page (optional) .....

2037.36

**TOTAL** This Period (last page this line number only) .....

16232.43

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 128 / 133

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DIRECTECHNature of Debt (Purpose):  
CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City State ZIP Code  
GAITHERSBURG MD 20877

Outstanding Balance Beginning This Period

223.11

Transaction ID: SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC - DATA PROCESSING SER-  
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

928.83

Transaction ID: SD10.51122

Amount Incurred This Period

0.00

Payment This Period

928.83

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC - DATA PROCESSING SER-  
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

142.45

Transaction ID: SD10.51123

Amount Incurred This Period

0.00

Payment This Period

142.45

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

223.11

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 129 / 133

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC - DATA PROCESSING SER-  
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.52342

Amount Incurred This Period

299.85

Payment This Period

299.85

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC - DATA PROCESSING SER-  
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.52345

Amount Incurred This Period

387.17

Payment This Period

387.17

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC - DATA PROCESSING SER-  
VICES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.52347

Amount Incurred This Period

381.69

Payment This Period

0.00

Outstanding Balance at Close of This Period

381.69

1) **SUBTOTALS** This Period This Page (optional).....

381.69

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 130 / 133

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MWM DIRECT MARKETING SERVICESNature of Debt (Purpose):  
PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State ZIP Code  
ELKRIDGE MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
PAC CAGING AND DATA ENTRY  
SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

1088.35

Transaction ID: SD10.51124

Amount Incurred This Period

0.00

Payment This Period

1088.35

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
PAC - CAGING AND DATA ENT-  
RY SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.52348

Amount Incurred This Period

1209.02

Payment This Period

0.00

Outstanding Balance at Close of This Period

1209.02

**1) SUBTOTALS** This Period This Page (optional).....

3529.92

**2) TOTALS** This Period (last page this line number only).....

4134.72

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

4134.72

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 132 / 133  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

NAME OF ACCOUNT  
 CAMPAIGN FOR WORKI-  
 NG FAMILIES

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

9375.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

9375.00

Transaction ID: H3.52340

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

9375.00

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

9375.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A. Full Name (Last, First, Middle Initial)**  
GARY BAUER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:  
PAC POLITICAL AND GEN ADMIN CONSULTING

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

109000.00

Date 

M	M
0	6

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.52320

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6625.00

6625.00

13250.00

**B. Full Name (Last, First, Middle Initial)**  
BILL MOELLER

Mailing Address

2800 SHIRLINGTON ROAD #930

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement:  
PAC POLITICAL RESEARCHER/WRITER

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

111750.00

Date 

M	M
0	6

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.52321

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1375.00

1375.00

2750.00

**C. Full Name (Last, First, Middle Initial)**  
Dorie Velezis

Mailing Address

2800 S. Shirlington Road, #930

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement:  
PAC ACCOUNTING SERVICES

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

114500.00

Date 

M	M
0	6

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.52323

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1375.00

1375.00

2750.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9375.00

9375.00

18750.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

9375.00

9375.00

18750.00